



MODIFIED APPLICATION TO ESTABLISH A FACILITY
NORTH DAKOTA DEPARTMENT OF FINANCIAL INSTITUTIONS
BANKING AND TRUST COMPANIES DIVISION
SFN 50950 (12-2001)

2000 Schafer Street, Suite G
Bismarck, ND 58501-1204
Telephone (701) 328-9933
Fax Number (701) 328-9955
Email dfi@state.nd.us

Used only in conjunction with merger applications for former charter location.

Name			
Charter Address	City	State	Zip Code
Proposed Facility			
Address	City	State	Zip Code

INFORMATION FOR THE APPLICANT

Schedules or inserts may be attached to this application whenever additional space is needed. Such attached schedules or inserts are a part of this application and should be on 8 1/2 X 11 paper. Applications are to be securely bound.

A preliminary application should be first submitted for Department review. Upon determination the application is complete, the Department will request an original application and ten copies. A complete copy should be retained by the bank.

Any facsimile filed application has the same force and effect as the original. Within five (5) days after the Department or State Banking Board received the facsimile transmission, the original signed document and filing fee must be received by the Board.

Requests for clarification as to what information is necessary to complete this application should be directed to the Department of Financial Institutions.

You may provide any information in addition to that requested in this application which, in your opinion, might aid in the disposition of your proposal.

Complete responses to all questions in this application will expedite processing.

An application fee of one thousand five hundred (\$1,500) must accompany the application.

In preparing your application, keep in mind that the State Banking Board deems that public policy warrants making all information submitted to it in connection with your application available for public review unless it is confidential in nature.

It is the responsibility of the applicant to identify the information submitted with the proposal which it deems CONFIDENTIAL clearly and on separate pages. Under the confidentiality statute, records considered confidential must meet the following criteria: (1) trade secrets and commercial or financial information; (2) personal and medical files and similar files the disclosure of which would constitute a clearly unwarranted invasion of privacy; and (3) examination report information. However, the determination of the question of confidentiality and the discretion to release information submitted to it which is exempt resides with the State Banking Board. Specific information you indicate to be confidential may be made available for public review after consideration.

As an additional service, this application is available on 3 1/2" disk format, Microsoft Word, by contacting the Department.

RESOLUTION OF BOARD OF DIRECTORS OF APPLICANT BANK

The Board of Directors of the applicant bank at a meeting duly called and held on _____ adopted the following Resolution: (Date)

Whereas it is the sense of this meeting that application should be made on behalf of this bank to the State Banking Board for written consent to establish a facility at:

Street Address	City	State	Zip Code
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in accordance with the provisions of the North Dakota Century Code;

NOW, THEREFORE, IT IS RESOLVED, that the President or Vice President and the Cashier or Secretary of this bank are hereby authorized and directed to make application on behalf of this bank to the State Banking Board to establish a facility at:

Street Address	City	State	Zip Code
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and to submit in connection therewith information on the several factors enumerated in the North Dakota Century Code for the purpose of inducing the State Banking Board to grant approval to establish a facility as indicated in this Resolution.

The above Resolution has not been resinded or modified and has been duly entered in the minute book of the applicant bank. Application is hereby made.

Signature of President or Vice President	Date
Attest (Cashier or Secretary)	Date
SEAL	

**BANK REPRESENTATIVE RESPONSIBLE FOR RESPONDING TO
QUESTIONS RELATING TO THIS APPLICATION**

Name	Date
Title	Telephone Number

SECTION I - PLEASE ATTACH THE FOLLOWING TO THE COMPLETED APPLICATION

- A. A copy of the applicant bank's most recent month-end financial statement.
- B. Copies of the applicant bank's year-end financial statements for the last two years.

**SECTION II - MANAGEMENT OF PROPOSED FACILITY
(Complete only if not provided in merger application)**

Name of facility manager and any biological information related to banking experience
Number of full time equivalent employees

SECTION III - OTHER BANKS AND FACILITIES

Identify the trade area for the proposed facility, and the names and addresses of all banks within the trade area of the proposed facility
A statement relating to whether or not other banks will be seriously injured by the approval of this application.

SECTION IV -DESCRIPTION OF PROPOSED FACILITY

Description of the site of the proposed facility
Description of the proposed facility and an estimate of the cost of establishing and maintaining such separate facility
If the facility is leased, please provide a copy of the proposed lease and justification for the lease not to be capitalized on the bank's books

SECTION V - CONVENIENCE AND NEEDS

Statement relating to the convenience, needs, and welfare of the people of the community and area to be served by the proposed facility. (Provide map.)
E.g. number of existing customers that may utilize the new facility.

SECTION VI - TYPE OF BUSINESS TO BE CONDUCTED AND PROPOSED BUSINESS HOURS

List all services which will be provided at the proposed facility

Facility proposed business days and hours of operation

SECTION VII - RELATIONSHIPS AND ASSOCIATIONS WITH THE BANK
(Complete only if not provided in merger application)

Are any architects, real estate brokers, the sellers or lessors of land, buildings or equipment listed in this application directly or indirectly associated with the applicant? ☐Yes ☐No (If yes, complete the following table)

NAME	ITEM (Mark Appropriate Column)			RELATIONSHIP OR ASSOCIATION WITH BANK (Specify Director, Officer, 5% Stockholder, or their relatives. Designate any business interests of the aforementioned.)
	LAND	BLDG	EQUIP	

If fixed assets are to be purchased from a related party, evidence of the reasonableness of the cost(s) must be provided. Attach copies of bids, independent appraisals and/or other supporting evidence.

If an insider is a party to any lease contract in connection with the application, explain the manner in which lease payments were determined and submit a copy or draft copy of the lease.

FEES PAID IN CONNECTION WITH THE PROPOSAL

NAME OF RECIPIENT	TYPE OF FEES PAID (Mark appropriate column)			RELATIONSHIP OR ASSOCIATION WITH BANK (Specify Director, Officer, 5% Stockholder, or their relatives. Designate any business interests of the aforementioned.)	AMOUNT
	LEGAL	CONSULTING	OTHER		

SECTION VIII - ADEQUACY OF THE CAPITAL STRUCTURE

Are there any plans to increase the capital structure other than through retained earnings?
☐ Yes ☐ No (If yes, give details)

Provide three years (year-end) projections for total bank assets, liabilities, and equity, which includes the proposed facility: